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NOV 07 2005

Fax Cover Letter

Date: 7 November 2005

TO: Commissioner for Patents

Company: USPTO

Subject: US Application No. 10/612,691

Fax No: 571-273-8300

Filed: 07/02/2003

Erosion-Resistant Hydrocyclone  
Liner

Inventor: Brent R. Knox-Holmes et al

Art Unit: 3653

Examiner: Kaitlin S. Joerger

Atty. Docket No. PII-030757 US

(PET-1006US)

From: Rita Kompa for Peter Bielinski

Department: PATENT SERVICES

IF FAX COPIES ARE NOT RECEIVED CLEARLY, PLEASE CONTACT

Name: RITA KOMPA, Patent Secretary

Phone No: 713.939.2411

Fax No: 713.939.2856

Page: (INCLUDING COVER PAGE)

1 of 5

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Certificate of Facsimile Transmission

I hereby certify that this correspondence and the documents identified as enclosed therein are being transmitted via facsimile to 571-273-8300 on this date November 02, 2005, addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature: Rita Kompa

Printed Name: Rita Kompa

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PTO/SB/21 (09-04)

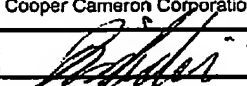
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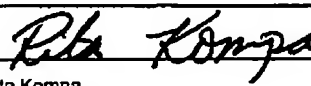
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing) <i>Including fax cover</i>	Application Number	10/812,691	<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b> <b>NOV 07 2005</b>
	Filing Date	07/02/2003	
	First Named Inventor	Brent R. Knox-Holmes	
	Art Unit	3653	
	Examiner Name	Kaitlin S. Joerger	
Total Number of Pages in This Submission	<b>5</b>	Attorney Docket Number	PET-1006US, now PII-030757 US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement <i>A 4 B</i>	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<b>Remarks</b>	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Cooper Cameron Corporation	
Signature		
Printed name	Peter Bleilnski	
Date	11/7/2005	Reg. No. 29,282

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature		
Typed or printed name	Rita Kompka	Date November 7, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918).**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

180.00

**Complete if Known**

Application Number 10/612,691

Filing Date 07/02/2003

First Named Inventor Brent R. Knox-Holmes

Examiner Name Kaitlin S. Joerger

Art Unit 3653

Attorney Docket No. PET-1006-US now PII-030757 US

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**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):☒ Deposit Account Deposit Account Number: 03-0335 Deposit Account Name: Cameron Div of Cooper Cam

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.18 and 1.17☒ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)

Small Entity Fee (\$)

Each independent claim over 3 (including Reissues)

50

25

Multiple dependent claims

200

100

360

180

Total Claims Extra Claims Fee (\$)

- 20 or HP = x =

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$)

- 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

- 100 = / 50 = (round up to a whole number) x =

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): Submission of an Information Disclosure Statement

\$180.00

**SUBMITTED BY**

Signature

Registration No. 29,282

Telephone 713-939-2411

Name (Print/Type) Peter Blielinski

Date 11/7/2005

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/C8A (07-05)

Approved for use through 07/31/2006. OMB 0651-0031

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<p>Substitute for form 1449/PTO</p> <p style="text-align: center;"><b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b></p> <p style="text-align: center;">(Use as many sheets as necessary)</p>		<p style="text-align: center;"><b>Complete if Known</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td style="width: 50%;">10/612,691</td> </tr> <tr> <td>Filing Date</td> <td>07/02/2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Brent R. Knox-Holmes</td> </tr> <tr> <td>Art Unit</td> <td>3653</td> </tr> <tr> <td>Examiner Name</td> <td>Kaitlin S. Joerger</td> </tr> <tr> <td>Attorney Docket Number</td> <td>PET-1006-US now PII-030757 us</td> </tr> </table>		Application Number	10/612,691	Filing Date	07/02/2003	First Named Inventor	Brent R. Knox-Holmes	Art Unit	3653	Examiner Name	Kaitlin S. Joerger	Attorney Docket Number	PET-1006-US now PII-030757 us
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Examiner Name	Kaitlin S. Joerger														
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[illegible]

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	7*
		Country Code <sup>2</sup> Number <sup>3</sup> Kind Code <sup>4</sup> (if known)				
		EP 1 136 132	09-26-2001	Hans Peter Kaempfer		
		GB 2 214 841	09-13-1989	Boart International Ltd.		

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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*(Use as many sheets as necessary)*

**Complete if Known**

<b>Application Number</b>	10/612,691
<b>Filing Date</b>	07/02/2003
<b>First Named Inventor</b>	Brent R. Knox-Holmes
<b>Art Unit</b>	3653
<b>Examiner Name</b>	Kaitlin S. Joerger
<b>Attorney Docket Number</b>	PET-1006US, now PII-030757 US

[illegible]

Examiner Signature		Date Considered	
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**EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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